DOCUMENT RESUME

ED 129 029 EC 091 235

TITLE	Hyperactivity--Drug Therapy/Food Additives/Allergies. A Selective Bibliography. Exceptional Child Bibliography Series No. 602.
INSTITUTION	Council for Exceptional Children, Reston, Va. Information Services and Publications.
SPONS AGENCY	National Inst. of Education (DHEW), Washington, D.C.
PUB DATE	76
NOTE	19p.
AVAILABLE FROM	CEC Information Services and Publications, The Council for Exceptional Children, 1920 Association Drive, Reston, Virginia 22091 ($4.00)
EDRS PRICE	MF-$0.83 HC-$1.67 Plus Postage.
DESCRIPTORS	*Abstracts; *Allergy; *Annotated Bibliographies; *Drug Therapy; Elementary Secondary Education; Exceptional Child Education; Exceptional Child Research; *Hyperactivity
IDENTIFIERS	*Food Additives

ABSTRACT

The annotated bibliography on Hyperactivity--Drug Therapy/Food Additives/Allergies contains approximately 65 abstracts and associated indexing information for documents or journal articles published from 1968 to 1975 and selected from the computer files of the Council for Exceptional Children's Information Services and the Education Resources Information Center (ERIC). It is explained that titles were chosen in response to user requests and analysis of current trends in the field. Abstracts include bibliographic data (identification or order number, publication date, author, title, source or publisher, and availability); descriptors indicating the subject matter covered; and a summary of the document's contents. Also provided are instructions for using the bibliography, a list of journals from which articles were abstracted, and an order form for ordering microfiche or paper copies of the documents through the ERIC Document Reproduction Service. (JM)

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Hyperactivity-Drug Therapy/ Food Additives/Allergies

A Selective Bibliography

CEC Information Services and Publications
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1920 Association Drive
Reston, Virginia 22091

Exceptional Child Bibliography Series No. 602

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ED091235

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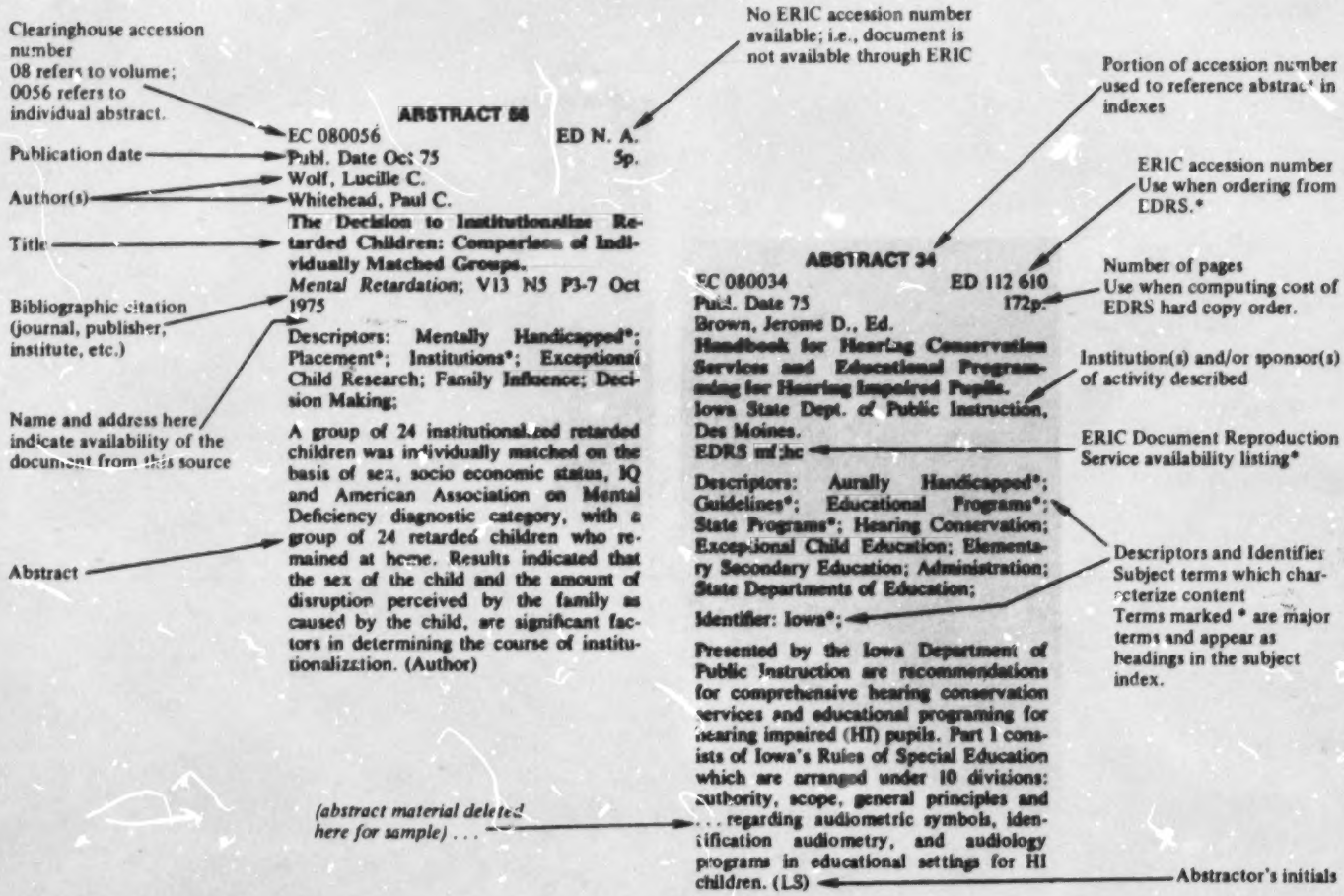
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ABSTRACT 56
EC 080056
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Publication date
Publ. Date Oct 75
5p.
ERIC accession number
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Author(s)
Wolf, Lucille C.
Whitehead, Paul C.
Title
The Decision to Institutionalize Retarded Children: Comparison of Individually Matched Groups.
Mental Retardation; V13 N5 P3-7 Oct 1975
Bibliographic citation (journal, publisher, institute, etc.)
Number of pages
Use when computing cost of EDRS hard copy order.
Descriptors: Mentally Handicapped*; Placement*; Institutions*; Exceptional Child Research; Family Influence; Decision Making;
Name and address here indicate availability of the document from this source
A group of 24 institutionalized retarded children was individually matched on the basis of sex, socio economic status, IQ and American Association on Mental Deficiency diagnostic category, with a group of 24 retarded children who remained at home. Results indicated that the sex of the child and the amount of disruption perceived by the family as caused by the child, are significant factors in determining the course of institutionalization. (Author)
Abstract
ABSTRACT 34
EC 080034
ED 112 610
Publ. Date 75
172p.
Brown, Jerome D., Ed.
Handbook for Hearing Conservation Services and Educational Programming for Hearing Impaired Pupils.
Iowa State Dept. of Public Instruction, Des Moines.
Institution(s) and/or sponsor(s) of activity described
EDRS mf;hc
ERIC Document Reproduction Service availability listing*
Descriptors: Aurally Handicapped*; Guidelines*; Educational Programs*; State Programs*; Hearing Conservation; Exceptional Child Education; Elementary Secondary Education; Administration; State Departments of Education;
Descriptors and Identifiers
Subject terms which characterize content
Terms marked * are major terms and appear as headings in the subject index.
Identifier: Iowa*;
Presented by the Iowa Department of Public Instruction are recommendations for comprehensive hearing conservation services and educational programing for hearing impaired (HI) pupils. Part 1 consists of Iowa's Rules of Special Education which are arranged under 10 divisions: authority, scope, general principles and
(abstract material deleted here for sample) . . .
. . . regarding audiometric symbols, identification audiometry, and audiology programs in educational settings for HI children. (LS)
Abstractor's initials

CEC Information Center Journal Collection

The CEC Information Center regularly receives more than 200 journals which are examined for material concerning exceptional children. Articles judged to meet established criteria are abstracted, indexed and published in *Exceptional Child Education Abstracts (ECEA)*. Some of these articles are indexed and submitted also for announcement in *Current Index to Journals in Education (CIJE)*, an Educational Resources Information Center (ERIC) publication. The following list (current May 1976) is *representative* of journals currently received.

*Academic Therapy, 1539 Fourth Street, San Rafael, California 94901

ACTA Symbolica, University of Akron, Akron, Ohio 44304

Adolescence, PO Box 165, 391 Willets Road, Roslyn Heights, New York 11577

*American Annals of the Deaf, 5034 Wisconsin Avenue NW, Washington DC 20016

American Education, 400 Maryland Avenue SW, Washington DC 20202

American Educational Research Journal, 1126 16th Street NW, Washington DC 20036

American Journal of Art Therapy, 6010 Broad Branch Road, Washington DC 20015

American Foundation for the Blind Research Bulletin, 15 West 16th Street, New York, New York 10011

**American Journal of Diseases of Children, 535 North Dearborn Street, Chicago, Illinois 60610

*American Journal of Mental Deficiency, 79 Sheridan Avenue, Albany, New York 12210

American Journal of Nursing, 10 Columbus Circle, New York, New York 10019

**American Journal of Occupational Therapy, 6000 Executive Boulevard, Suite 200, Rockville, Maryland 20852

*American Journal of Orthopsychiatry, 1790 Broadway, New York, New York 10019

Archives of Otolaryngology, 535 North Dearborn Street, Chicago, Illinois 60610.

Arithmetic Teacher, 1201 16th Street NW, Washington DC 20036

ASHA, 9030 Old Georgetown Road, Washington DC 20014

Audecibel, 24261 Grand River Avenue, Detroit, Michigan 48219

Auditory & Hearing Education, 15300 Ventura Boulevard, Suite 301, Sherman Oaks, California 91403

Audiovisual Instruction, 1201 16th Street NW, Washington, DC 20036

Australian Children Limited, Box 91, Brighton 5048, South Australia

*Australian Journal of Mental Retardation, P.O. Box 255, Carlton, South Victoria 3053, Australia

AVISO, Newark State College, Union, New Jersey 07083

**Behavior Therapy, 111 Fifth Avenue, New York, New York 10003

Behavior Today, Ziff-Davis Publishing Co., 1156 15th Street NW, Washington DC 20036

Behavioral Disorders, Council for Children with Behavior Disorders, Indiana University, Bloomington, Indiana 47401

British Journal of Disorders of Communication, 4345 Annandale Street, Edinburgh EH7 4 AT, Scotland

British Journal of Mental Subnormality, Monyhull Hospital, Birmingham B30 3QB, England

British Journal of Physical Education, Ling House, 10 Nottingham Place, London WIM 4 AX, England

Bulletin of the Orton Society, 8415 Bellona Lane, Suite 204, Towson, Maryland 20402

Bulletin of Prosthetics Research, US Government Printing Office, Washington DC 20402

*Bureau Memorandum, 126 Langdon Street, Madison, Wisconsin 53702

CSMR Bulletin, 345 Campus Towers, Edmonton, Alberta, Canada

Canada's Mental Health, Information Canada, Ottawa K1A 0S9, Canada

CEDR Quarterly, Phi Delta Kappa, PO Box 789, Bloomington, Indiana 47401

Child Care Quarterly, 2852 Broadway, Morningside Heights, New York 10025

Child Development, 5750 Ellis Avenue, Chicago, Illinois 60637

**Child Psychiatry & Human Development, 2852 Broadway, Morningside Heights, New York 10025

Child Welfare, 67 Irving Place, New York, New York 10003

Childhood Education, 3615 Wisconsin Avenue NW, Washington DC 20016

Children Today, US Government Printing Office, Washington DC 20402

Children's House, Box 111, Caldwell, New Jersey 07006

Colorado Journal of Educational Research, University of Northern Colorado, Greeley, Colorado 80631

Communication Education (formerly Speech Teacher) Speech Communication Association, Statler Hilton Hotel, New York, New York 10001

Compact, 300 Lincoln Tower, 1860 Lincoln Street, Denver, Colorado 80203

Day Care & Early Education, 2852 Broadway, New York, New York 10025

Deaf American, 5125 Radnor Road, Indianapolis, Indiana 46226

Deficience Mentale/Mental Retardation, York University, 4700 Keele Street, Downsview, Ontario M3J 1P3, Canada

Developmental Medicine and Child Neurology, Spastic International Medical Publications, 20-22 Mortimer Street, London W1N 7RD, England

Devereux Forum, 19 South Waterloo Road, Devon, Pennsylvania 19333

DSH Abstracts, Gallaudet College, Washington, DC 20002

Dyslexia Review, The Dyslexia Institute, 133 Gresham Road, Staines, TW18 2AJ, England

*Education and Training of the Mentally Retarded, 1920 Association Drive, Reston, Virginia 22091

Education Digest, PO Box 623, 416 Longshore Drive, Ann Arbor, Michigan 48107

*Education of the Visually Handicapped, 919 Walnut St. Fourth Floor, Philadelphia, Pennsylvania 19107

Educational & Psychological Measurement, Box 6907, College Station, Durham, North Carolina 27708

Educational Forum, 343 Armory Building, University of Illinois, Champaign, Illinois 61820

Educational Horizons, 2000 East 8th Street, Bloomington, Indiana 47401

Educational Leadership, 1201 16th Street NW, Washington DC 20036

Educational Researcher, 1126 16th Street NW, Washington DC 20036

Educational Technology, 140 Sylvan Avenue, Englewood Cliffs, New Jersey 07632

Elementary School Journal, 5801 Ellis Avenue, Chicago, Illinois 60637

English Journal, 1111 Kenyon Road, Urbana, Illinois 61801

*Exceptional Children, 1920 Association Drive, Reston, Virginia 22091

*Exceptional Parent, 264 Beacon Street, Boston, Massachusetts 02116

Family Involvement, Canadian Education Programs, 41 Madison Avenue, Toronto, Ontario M5R 2S2, Canada

Focus on Exceptional Children, 6635 East Villanova Place, Denver, Colorado 80222

*Gifted Child Quarterly, 8080 Springvalley Drive, Cincinnati, Ohio 45236

Harvard Educational Review, 23 South Main Street, Uxbridge, Massachusetts 02138

Hearing, 105 Gower Street, London WCIE 6AH, England

*Hearing & Speech Action, 814 Thayer Avenue, Silver Spring, Maryland 20910

Hearing Rehabilitation Quarterly, New York League for the Hard of Hearing, 71 W. 23rd Street, New York, New York 10010

Human Behavior, PO Box 2810, Boulder, Colorado 80302

Humanist, 923 Kensington Ave., Buffalo, New York 14215

Illinois Schools Journal, 6800 South Stewart Avenue, Chicago, Illinois 60621

Indiana Speech & Hearing Journal, Ball State University, Muncie, Indiana 47306

Instructor, PO Box 6099, Duluth, Minnesota 55806

Inter-Clinic Information Bulletin, 317 East 34th Street, New York, New York 10016

International Child Welfare Review, 1 Rue De Varembe, 1211 Geneva 20, Switzerland

International Journal of Child Psychiatry, Verlag 10, Basel 13, Switzerland

International Rehabilitation Review, 219 East 44th Street, New York, New York 10017

Involvement, PO Box 460, Oak Ridges, Ontario, Canada

*denotes journals monitored for CIJE.

**denotes copyrighted journals for which ECEA has been granted permission to use author abstracts.

Journal for Special Educators of the Mentally Retarded, 171, Center Conway, New Hampshire 03813

*Journal of Abnormal Child Psychology, **Plenum Publishing Corp., 227 W. 17th Street, New York, New York 10011

**Journal of Abnormal Psychology, 1200 17th Street NW, Washington DC 20036

*Journal of Applied Behavior Analysis, **University of Kansas, Lawrence, Kansas 66044

Journal of Applied Rehabilitation Counseling, 1522 K Street NW, Washington DC 20005

Journal of Association for Study of Perception, PO Box 744, De Kalb, Illinois 60115

*Journal of Autism & Childhood Schizophrenia, **Plenum Publishing Corp., 227 W. 17th Street, New York, New York 10011

Journal of Child Psychology & Psychiatry, Pergamon Press, Elmsford, New York 10523

Journal of Clinical Child Psychology, 111 South Meramec Avenue, No. 208, St. Louis, Missouri 63105

Journal of Communication Disorders, American Elsevier Publishing Co., 52 Vanderbilt Avenue, New York, New York 10014

Journal of Community Health, Human Sciences Press, 72 Fifth Avenue, New York, New York 10014

**Journal of Consulting & Clinical Psychology, 1200 17th Street NW, Washington DC 20036

Journal of Creative Behavior, 1300 Elmwood Avenue, Buffalo, New York 14222

Journal of Developmental Disabilities, PO Box 8470, Gentilly Station, New Orleans, Louisiana 70182

Journal of Education, Department of Education, Halifax, Nova Scotia

**Journal of Educational Psychology, 1200 17th Street NW, Washington DC 20036

**Journal of Educational Research, Box 1605, Madison, Wisconsin 53701

Journal of General Education, 215 Wagner Building, University Park, Pennsylvania 16802

*Journal of Learning Disabilities, 5 North **Wabash Avenue, Chicago, Illinois 60602

Journal of Marriage & the Family, 1219 University Avenue SE, Minneapolis, Minnesota 55414

*Journal of Mental Deficiency Research, 86 Newman Street, London WIP 4 AR, England

Journal of Music Therapy, Box 610, Lawrence, Kansas 66044

Journal of Negro Education, Howard University, Washington DC 20001

**Journal of Nervous & Mental Disease, 428 East Preston Street, Baltimore, Maryland 21201

*Journal of Pediatrics, 11830 Westline Industrial Drive, St. Louis, Missouri 63141

**Journal of Personality Assessment, 1070 East Angeleno Avenue, Burbank, California 91501

Journal of Reading, 6 Tyre Avenue, Newark, Delaware 19711

Journal of Rehabilitation, 1522 K Street NW, Washington DC 20005

Journal of Rehabilitation of the Deaf, 814 Thayer Avenue, Silver Spring, Maryland 20910

Journal of School Health, American School Health Association, Kent, Ohio 44240

**Journal of School Psychology, 51 Riverside Avenue, Westport, Connecticut 06880

*Journal of Special Education, Grune and **Stratton, 111 Fifth Avenue, New York, New York 10003

*Journal of Speech & Hearing Disorders, 9030 Old Georgetown Road, Washington, DC 20014

*Journal of Speech & Hearing Research, **9030 Old Georgetown Road, Washington DC 20014

Journal of Teacher Education, One Dupont Circle, Washington DC 20036

*Language Speech & Hearing Services in Schools, 9030 Old Georgetown Road, Washington DC 20014

Lantern, Perkins School for the Blind, Watertown, Massachusetts 02172

Learning, 530 University Avenue, Palo Alto, California 94301

Mathematics Teacher, 1906 Association Drive, Reston, Virginia 22091

*Mental Retardation, 5201 Connecticut Ave-**nue NW, Washington DC 20015

Merrill Palmer Quarterly, 71 East Ferry Avenue, Detroit, Michigan 48202

Momentum, 350, One Dupont Circle, Washington DC 20036

Music Educators Journal, 1902 Association Drive, Reston, Virginia 22091

NASSP Bulletin, 1904 Association Drive, Reston, Virginia 22091

National Elementary Principal, 1801 North Moore Street, Arlington, Virginia 22209

The New Beacon, 224 Great Portland Street, London WIN/AA, England

*New Outlook for the Blind, 15 West 16th Street, New York, New York 10011

Notre Dame Journal of Education, PO Box 686, Notre Dame, Indiana 46556

Nursing Outlook, 10 Columbus Circle, New York, New York 10019

Optometric Weekly, 5 North Wabash Avenue, Chicago, Illinois 60602

Parents Voice, Journal of the National Society of Mentally Handicapped Children, Pembridge Square, London W2 4EP, England

Peabody Journal of Education, George Peabody College for Teachers, Nashville, Tennessee 37203

*Pediatrics, PO Box 1034 Evanston, Illinois **60204

**Personnel & Guidance Journal, 1607 New Hampshire Avenue NW, Washington DC 20009

Phi Delta Kappan, 8th & Union Streets, Bloomington, Indiana 47401

**Physical Therapy, 1156 15th Street NW, Washington DC 22005

Pointer, PO Box 131, University Station, Syracuse, New York 13210

Psychology in the Schools, 4 Conant Square, Brandon, Vermont 05733

Psychology Today, PO Box 2990, Boulder, Colorado 80302

Quarterly Journal of Speech, Speech Communication Association, Statler Hilton Hotel, New York, New York 10001

**Reading Research Quarterly, 6 Tyre Avenue, Newark, Delaware 19711

Reading Teacher, 6 Tyre Avenue, Newark, Delaware 19711

Rehabilitation Digest, One Yonge Street, Suite 2110, Toronto Ontario M5E 1E8, Canada

Rehabilitation Gazette, 4502 Maryland Avenue, St. Louis, Missouri 63108

*Rehabilitation Literature, 2023 West Ogden **Avenue, Chicago, Illinois 60612

Rehabilitation Teacher, 88 St. Stephen Street, Boston, Massachusetts 02115

Remedial Education, 5 Netherlee Street, Glen Iris, Victoria 3146, Australia

Review of Educational Research, 1126 16th Street NW, Washington, DC 20036

Scandinavian Journal of Rehabilitation Medicine, Gamla Brogatan 26, Box 62, S-101 20 Stockholm 1, Sweden

Schizophrenia Bulletin, 5600 Fishers Lane, Rockville, Maryland 20852

School Media Quarterly, 1201-1205 Bluff Street, Fulton, Missouri 65251

*Sight Saving Review, 79 Madison Avenue, New York, New York 10016

Sign Language Studies, Linstock Press, 9306 Mintwood St., Silver Spring, Maryland 20901

*Slow Learning Child, St. Lucia, Brisbane 4067, Australia

**Social Work, 49 Sheridan Avenue, Albany, New York 12210

Southern Journal of Educational Research, Box 107, Southern Station, Hattiesburg, Mississippi 39401

Special Children, American Association of Special Educators, 107-20 125th Street, New York, New York 11419

*Special Education: Forward Trends, National Council for Special Education, 12 Hollycroft Avenue, London NW3 7QL, England

Special Education in Canada, Parkway V S, 1 Danforth Avenue, Toronto, Ontario, Canada

Speech Monographs, Speech Communication Association, Statler Hilton Hotel, New York, New York 10001

Teacher, 22 West Putnam Avenue, Greenwich, Connecticut 06830

Teacher of the Blind, Royal School for the Blind, Church Road North, Wavertree, Liverpool L156TQ, England

Teacher of the Deaf, 50 Topsham Road Exeter EX2 4NF, England

Teachers College Record, 525 West 120th Street, New York, New York 10027

**TEACHING Exceptional Children, 1920 Association Drive, Reston, Virginia 22091

*Volta Review, 3417 Volta Place NW, Wash-**ington, DC 20007

Young Children, 1384 Connecticut Avenue NW, Washington, DC 20009

ABSTRACT 188

EC 03 0189 ED N.A.
Publ. Date (70) 1p.
Oettinger, Leon, Jr.
Amphetamines, Hyperkinesis and Learning.
EDRS not available
CANHC Literature Distribution, P. O. Box 790, Lomita, California 90717.

Descriptors: exceptional child services; learning disabilities; medical treatment; drug therapy; hyperactivity; drug addiction; drug abuse; Ritalin; amphetamines

The medical use of amphetamines to control hyperactivity and improve learning is considered historically and currently. Studies on the effects of Ritalin and of amphetamines are noted. Some side effects are noted along with an absence of habituation, addiction, or abuse. Use of amphetamines and similar drugs to control underlying problems thus preventing later drug abuse is mentioned. (MS)

ABSTRACT 1042

EC 03 1042 ED N.A.
Publ. Date Dec 68 14p.
Epstein, Estelle P. And Others
Chemotherapy and the Hyperkinetic Child.
EDRS not available
Journal Of Education; V151 N2 P47-60 Dec 1968

Descriptors: exceptional child research; emotionally disturbed; hyperactivity; drug therapy; teacher role

To gather information concerning the utilization of drugs specifically with hyperkinetic children, an investigation was made of the current practices utilizing the various amphetamines, the most common drugs used, and persons dealing directly with such children. The concern of the investigation was the problem facing a classroom teacher when confronted with a hyperkinetic child, and ways in which to promote better understanding of the situation. From the information received, assumptions were drawn and recommendations for teachers were made. (CD)

ABSTRACT 1492

EC 03 1492 ED N.A.
Publ. Date Jan 71 8p.
Barcai, Avner
Predicting the Response of Children with Learning Disabilities and Behavior Problems to Dextroamphetamine Sulfate.
EDRS not available
Pediatrics; V47 N1 P73-80 Jan 1971

Descriptors: exceptional child research; learning disabilities; hyperactivity; behavior problems; drug therapy; medical research; behavior change; medical treatment; predictive validity; amphetamines; dextroamphetamine sulfate

The clinical study used a phenomenological, office practice approach to diagnose the hyperkinetic child who responds with improved concentration and organization of his mental facilities to the amphetamines. The combination of anamnestic items, information from the teacher, and the clinical interview were found to be effective in correctly predicting approximately 85% of behaviorally disturbed children who would respond favorably to the stimulating drugs. The finger twitch test and a list of selected questions, which could be used by the pediatrician in his office, were found to lead to a weighted, non-inferential assessment of the child's mental status, as a help in determining the advisability of prescribing the stimulant for some behaviorally disturbed children. (Author)

ABSTRACT 2488

EC 03 2488 ED N.A.
Publ. Date Jun 71 7p.
Oettinger, Leon, Jr.
Learning Disorders, Hyperkinesis and the Use of Drugs in Children.
EDRS not available
Rehabilitation Literature; V32 N6 P162-7, 170 Jun 1971

Descriptors: exceptional child education; hyperactivity; drug therapy; learning disabilities; sedatives; diagnostic tests

The use of drugs to treat hyperactivity and learning disorders in children is discussed. The questions of misuse and abuse of stimulant drugs are scrutinized, and a defense of drug treatment as a normalizing agent for hyperactivity is given. Diagnostic evaluation of the patient before prescribed drug treatment, from physical check through psychological, intelligence, tactile perception, and dominance testing, is covered. The stress throughout the article is that drug treatment be thought of as preparation in which the functioning of the mind as a unit is improved so that it can then respond in a more nearly normal pattern. (CD)

ABSTRACT 2612

EC 03 2612 ED 051 612
Publ. Date 71 8p.
Report of the Conference on the Use of Stimulant Drugs in the Treatment of Behaviorally Disturbed Young School Children (Washington, D.C., January 11-12, 1971).
Department of Health, Education and Welfare, Washington, D. C.
EDRS mf,hc

Descriptors: exceptional child services; behavior problems; hyperactivity; drug therapy; drug abuse; conference reports

The advisory report for professionals and the public concerns the use of stimulant medications in treating elementary school-age children with behavioral disturbances. The discussion of the nature of children's behavioral disorders focuses upon hyperactivity, often termed minimal brain dysfunction or hyperkinetic behavioral disturbance, which is often treated with stimulant drugs. Incidence, causes, course, and diagnosis of hyperkinetic disorders are summarized, and drug treatment and its degree of success reviewed. Concerns voiced by the public and the media about hazards and abuses when stimulant medications are used for children are discussed and some misconceptions clarified. It is concluded that stimulant drugs are a valid method of treatment in hyperkinetic behavioral disorders, but not the only effective form of treatment. Expanded programs of continuing education and research are recommended. (KW)

ABSTRACT 2801

EC 03 2801 ED N.A.
Publ. Date Jun 71 6p.
Conference on Stimulant Drugs for Disturbed School Children.
EDRS not available
Inequality in Education; N8 P14-9 Jun 1971

Descriptors: exceptional child education; hyperactivity; behavior problems; drug therapy; learning disabilities; conference reports

A report of the conference on stimulant drugs for disturbed school children convened by the U.S. Office of Child Development, the article discusses behavior and hyperkinetic disorders and their incidence, causes, and course. The diagnosis of such disorders and approaches to treatment are considered, and concerns raised by the public and news media are explored. It is felt that children who can benefit from psychotropic medication should not be stigmatized, but that pharmaceutical companies and school personnel should refrain from unethical promotions and encourage such treatment only by medical specialists. The need for additional information in this area is cited. (The full report has been abstracted as EC 032 612.) (RJ)

ABSTRACT 2802

EC 03 2802 ED N.A.
Publ. Date Jun 71 6p.
Ireland, Roderick L.; Dimond, Paul R.
Drugs and Hyperactivity: Process Is Due.
EDRS not available
Inequality in Education; N8 P19-24 Jun 1971

Descriptors: exceptional child education; hyperactivity; behavior problems; drug therapy; legal problems; court cases

Factors are explored which must be considered when challenging the use of drugs for hyperactive school children by law suits. Medical evidence concerning behavior problems is considered as are the following three constitutional problems which arise: procedural due process, family power and personal autonomy, and equal protection. Each issue is discussed and illustrated by court cases. The assumption of the article is that the only issue facing a lawyer is a controversy--a client who refuses (or is contemplating refusing) to take drugs, and a school system which denies him admission unless he does so. The conclusion reached is that the courts, doctors, and school personnel must proceed cautiously and conservatively in this area. (RJ)

ABSTRACT 2951

EC 03 2951 ED N.A.
Publ. Date Aug 71 8p.
Claghorn, J. and Others

The Effect of Drugs on Hyperactivity in Children with Some Observations of Changes in Mineral Metabolism.
EDRS not available
Journal of Nervous and Mental Disease; V153 N2 P118-25 Aug 1971

Descriptors: exceptional child research; drug therapy; hyperactivity; metabolism; learning disabilities; biochemistry

Twenty-three hyperactive children in a state school for the mentally handicapped were used as subjects to test out the hypothesis that acetazolamide would reduce hyperactive behavior. For comparison, amphetamine, a commonly used drug in this indication, placebo, and no treatment were used. Activity was measured using a room equipped with monitored toys and sonic sensors as well as global and ward behavior rating scales. Measures of serum and red cell electrolytes were performed. Acetazolamide was found to reduce serum and red cell potassium. No other electrolyte effects were found with any drug. Of the four treatment conditions, acetazolamide and placebo were felt to improve hyperactivity; acetazolamide was statistically superior. The theoretical significance of this finding is not clear, as this drug is known to have many pharmacological actions. Large amounts of the drug enter the cerebrospinal fluid (CSF) and may directly affect neurons; CSF production is reduced and potassium levels are altered; carbonic anhydrase inhibition occurs. Any one of these actions might be relevant, or for that matter, combinations of these effects may, it is felt, account for the undisputable reduction in hyperactivity noted in this short trial. (Author)

ABSTRACT 2983

EC 03 2983 ED N.A.
Publ. Date Jun 71 13p.
Campbell, Susan B. and Others
Cognitive Styles in Hyperactive Children and the Effect of Methylphenidate.
EDRS not available
Journal of Child Psychology and Psychiatry; V12 N1 P55-67 Jun 1971

Descriptors: exceptional child research; learning disabilities; hyperactivity; cognitive development; cognitive processes; drug therapy; academic achievement; behavior change

Cognitive problems of hyperactive children and effects of energizing drugs on their cognitive performance were studied. Data suggested that hyperactive children usually employed less efficient problem solving strategies than normal children, which may have explained their poor academic achievement. Hyperactive children whose behavior was modified by methylphenidate seemed to solve problems more efficiently and carefully; academic achievement, classroom behavior, and cognitive abilities may have improved due to increased attention, response organization, and impulse control. (CB)

ABSTRACT 2984

EC 03 2984 ED N.A.
Publ. Date 71 11p.
Cott, Allan
Orthomolecular Approach to the Treatment of Learning Disabilities.
EDRS not available
Schizophrenia; V3 N2 P95-105 Second Quarter 1971

Descriptors: exceptional child research; learning disabilities; emotionally disturbed; hyperactivity; drug therapy; nutrition; schizophrenia; medical treatment; orthomolecular therapy; megavitamin therapy

Orthomolecular therapy for learning disabled children is discussed. On the hypothesis that the hyperactive, learning disabled child may actually have a biochemical or neurological disorder, the author has treated 500 emotionally disturbed and learning disabled children from 1966 to 1971. His successful treatment of using megavitamin therapy to provide optimum molecular brain compositions, especially optimum concentration of substances normally present in the human body, is briefly discussed. Main vitamins successfully used to control hyperactivity, ritualism, and seizures are niacin or niacinamide, ascorbic acid, pyridoxine, and calcium pantothenate. Advocating more studies relating advances in nutritional sciences to medicine, the author suggests that hyperactivity in the genetically predisposed child may be an early symptom of schizophrenia and may be made manifest by ingestion of cereal grains and their products. (CB)

ABSTRACT 3135

EC 03 3135 ED N.A.
Publ. Date Aug 71 11p.
Sykes, Donald H. and Others
Attention in Hyperactive Children and the Effect of Methylphenidate (Ritalin).
EDRS not available
Journal of Child Psychology and Psychiatry; V12 N2 P129-39 Aug 1971

Descriptors: exceptional child research; learning disabilities; hyperactivity; attention span; drug therapy; motor reactions; methylphenidate

The study examined the performance of 40 hyperactive children relative to that of 19 controls (matched for age, sex, and IQ) on a task susceptible to momentary lapses of attention; examined the motor restlessness of both groups while seated during the attention task, using a stabilimetric cushion after the design of Sprague and Toppe (1966); and investigated the effect of methylphenidate (ritalin), a central nervous system stimulant, on attention in the hyperactive children. It was found that the maintenance of attention to an experimenter-paced task requiring the detection of significant stimuli was impaired in the hyperactive subjects: they detected fewer of the significant stimuli and made more incorrect responses to non-significant stimuli. Presence or absence of an auditory distractor had no effect on either group. Motor restlessness of the hyperactive children was significantly greater, and while restlessness increased during the second session for both groups, it increased at a faster rate for the hyperactive group. Hyperactive children treated with methylphenidate (ritalin) improved significantly in all areas of performance as compared to hyperactive children given a placebo. (KW)

ABSTRACT 240

EC 04 0240 ED N.A.
Publ. Date Nov 71 3p.
Greenwold, Warren E.; Jones, Philip R.
Clearinghouse: The Effect of Methylphenidate on Behavior of Three School Children: A Pilot Investigation.
EDRS not available
Exceptional Children; V38 N3 P261-3 Nov 1971

Descriptors: exceptional child research; hyperactivity; behavior problems; drug therapy; emotionally disturbed; behavior change; student behavior; medical treatment; methylphenidate

The study examined the effects of methylphenidate (Ritalin) on three male students, ages 8-12, through double blind techniques, comparing teacher observations with those of a trained disinterested observer. Subjects were three hyperactive students who had been on medication for 1 year or less. Under the double blind technique students received methylphenidate for 1 week and placebo for 1 week. Each week teachers assigned an average rating to each of 67 items on a Behavior Problem Checklist, which covered four areas: conduct problem, personality problem, inadequacy and immaturity, and social delinquency. The classroom observer used an instrument with three categories of behaviors: deviant behaviors, attending or work oriented behaviors, and teacher-pupil interactions. Teachers noted a decrease in conduct problems and personality problems while students were receiving methylphenidate, and the observer noted decrease in deviant behaviors and teacher-pupil interactions and a slight improvement in attending under the same condition. (KW)

ABSTRACT 323

EC 04 0323 ED N.A.
Publ. Date Nov 71 6p.
Solomons, Gerald
Guidelines on the Use and Medical Effects of Psychostimulant Drugs in Therapy.
EDRS not available
Journal of Learning Disabilities; V4 N9 P470-5 Nov 1971

Descriptors: exceptional child services; emotionally disturbed; hyperactivity; learning disabilities; drug therapy; research reviews (publications); behavior patterns

Discussed is use of psychostimulant drugs in the 1950's through the 1970's in treatment of children with behavior disorders, hyperactivity, and learning problems. Difficulties with operational definitions and complicated methodology which have hampered determination of efficacy of such medication are presented. Research on the site and mechanism of action of psychostimulant drugs is

reviewed. The decision to initiate drug therapy for children with minimal cerebral dysfunction is now complicated by the climate of the times--the social revolution, particularly among the young, and above all, the present drug culture. A discussion of the therapeutic regimen is included. (Author)

ABSTRACT 324

EC 04 0324 ED N.A.
Publ. Date Nov 71 8p.
Conners, C. Keith
Recent Drug Studies with Hyperkinetic Children.
EDRS not available
Journal of Learning Disabilities; V4 N9 P476-83 Nov 1971

Descriptors: exceptional child services; research reviews (publications); learning disabilities; hyperactivity; drug therapy; behavior patterns; cognitive development

A brief overview is given of recent controlled studies of effects of stimulant drugs on general behavior, motor behavior, cognition and learning, physiological responsiveness and attention in hyperkinetic children. Emphasis is placed on objective methods of assessment of drug effects, as indicated by patterns of behavior and cognitive development. (Author/CB)

ABSTRACT 328

EC 04 0326 ED N.A.
Publ. Date Nov 71 8p.
Denhoff, Eric and Others
Effects of Dextroamphetamine on Hyperkinetic Children: A Controlled Double Blind Study.
EDRS not available
Journal of Learning Disabilities; V4 N9 P491-8 Nov 1971

Descriptors: exceptional child research; learning disabilities; hyperactivity; drug therapy; behavior rating scales; behavior patterns

Utilizing objective behavior scales for rating characteristics in the hyperkinetic syndrome, teachers' ratings revealed favorable effects of dextroamphetamine in 27 of a group of 42 children with hyperkinetic impulse disorder and learning difficulties. Statistical comparisons of ratings received under pretest, placebo, and drug conditions showed significant differences on the scales measuring hyperactivity, short attention span, and impulsivity. Teachers could preselect hyperkinetic children who would respond to medication with the questionnaire-rating scale technique. Other objective measures have been discussed which can be incorporated into the evaluative procedure. (Author)

ABSTRACT 329

EC 04 0329 ED N.A.
Publ. Date Nov 71 2p.
Novack, Harry S.
An Educator's View of Medication and Classroom Behavior.
EDRS not available
Journal of Learning Disabilities; V4 N9 P507-8 Nov 1971

Descriptors: exceptional child education; learning disabilities; hyperactivity; drug therapy; behavior change; discipline problems

Classroom teachers have two tasks to perform in assisting proper use of drug therapy on hyperactive children. The first is to supply objective observations on effectiveness of medication in controlling classroom behavior. The second is to develop teaching strategies for children who are unable to benefit from medication. Proper teacher training in behavior control techniques will make it possible for many children to learn with a minimum of medication to effect behavior change. (Author)

ABSTRACT 330

EC 04 0330 ED N.A.
Publ. Date Nov 71 9p.
Conrad, W. G. and Others
Effects of Amphetamine Therapy and Prescriptive Tutoring on the Behavior and Achievement of Lower Class Hyperactive Children.
EDRS not available
Journal of Learning Disabilities; V4 N9 P509-17 Nov 1971

Descriptors: exceptional child education; learning disabilities; hyperactivity; drug therapy; diagnostic teaching; disadvantaged youth; lower class; behavior patterns; academic achievement; perceptual motor coordination

The present study had two primary objectives: to evaluate the relatively long-term (4-6 months) effects of dextroamphetamine on behavior, achievement, and perceptual-cognitive functioning of hyperkinetic children: and to compare effects of dextroamphetamine and prescriptive perceptual-cognitive tutoring, using behavior rating scales. Sixty-eight children matched for intelligence and degree of hyperactivity were assigned to the following groups: placebo/no tutoring; placebo/tutoring; dextroamphetamine/no tutoring: and dextroamphetamine/tutoring. Doubleblind procedures were used in administration of medication. Results indicated that dextroamphetamine contributed to a reduction of hyperkinetic behavioral symptoms and to improvement in performance on various measures of perceptual motor and cognitive development. Twice-a-week tutoring for an average of 20 weeks resulted in gains on some Wechsler Intelligence Scale for Children subtests but was clearly not as effective as medication. Neither experimental condition significantly influenced academic achievement as measured by the Wide Range Achievement Test. Implications for the management and instruction of hyperkinetic children were discussed. (Author)

ABSTRACT 331

EC 04 0331 ED N.A.
Publ. Date Nov 71 5p.
Laufer, Maurice W.
Long-term Management and Some Follow-up Findings on the Use of Drugs with Minimal Cerebral Syndromes.
EDRS not available
Journal of Learning Disabilities; V4 N9 P518-22 Nov 1971

Descriptors: exceptional child education; learning disabilities; hyperactivity; drug therapy; behavior patterns; followup studies

Discussed is the hyperkinetic impulse disorder and its effect upon learning and behavior in children and adolescents. Clinical experience indicates that there may be a specific, beneficial, controlling effect from use of psychic energizers and cerebral stimulants, all characterized by causing an increase in available norepinephrine at cell surfaces in the central nervous system. Also covered are: effects of reducing quantity of norepinephrine at cell surfaces, medication administration, possible side effects and long-term outcomes of medications, recognition of outgrowth of hyperkinetic impulse disorder, and results of followup study showing current levels of functioning and presence or absence of persisting toxic effects from long-term use of the medications. (Author/CB)

ABSTRACT 332

EC 04 0332 ED N.A.
Publ. Date Nov 71 8p.
Report of the Conference on the Use of Stimulant Drugs in the Treatment of Behaviorally Disturbed Young School Children.
EDRS not available
Journal of Learning Disabilities; V4 N9 P523-30 Nov 1971

Descriptors: exceptional child education; learning disabilities; hyperactivity; elementary school students; drug therapy; behavior change; conference reports; public opinion

The advisory report for professionals and public briefly discusses aspects of stimulant medication use in treating hyperkinetic behavioral disorders in elementary school students. The general nature of behavioral disorders in children is outlined, with emphasis on hyperkinetic disorders. Incidence, etiology, course, and diagnosis of hyperkinetic disorders are mentioned briefly. Various treatment programs for hyperactivity are noted, such as behavior modification, elimination of disturbing influences in classroom and home, and stimulant medications. Concerns voiced by the public and media on stimulant medication use include medication toxicity, drug dependency, safeguards against misuse, stimulant medication as a risk for others, emotional handicaps caused by medication, and parental rights. Examined finally are role of pharmaceutical industry, professionals, and news media in publicizing stimulant drugs for children. (CB)

ABSTRACT 1299

EC 04 1299 ED N.A.
Publ. Date Feb 72 4p.
DeLong, Arthur R.
What Have We Learned From Psychoactive Drug Research on Hyperactives?
EDRS not available
American Journal of Diseases of Children; V123 N2 P177-80 Feb 1972

Descriptors: exceptional child research; hyperactivity; drug therapy; research

methodology; research design; research needs

The discussion of research dealing with the use of psychoactive drugs to modify hyperactive behavior first delineates seven variables or characteristics considered to be minimal in a study determining effects of such drug therapy and designed to meet the criteria of both researchers and physicians. These characteristics are placebo control, blind procedures, random assignment of patients to placebo and active drug, a uniform group of patients of sufficient size to permit statistical analysis, detailed description and measurement of subjects, precise description of measurements and criteria by which subjects will be evaluated, and detailed description of subject's social setting. Also discussed are five major questions raised by psychoactive drug studies. Questions concern name for the disorder, etiology, specific behaviors identifying hyperactivity, measurement of specific behaviors, and the drug and dosage to be used. (KW)

ABSTRACT 1324

EC 04 1324 ED 059 556
Publ. Date 71 35p.
Conners, C. Keith
Comparative Effects of Stimulant Drugs in Hyperkinetic Children.
Massachusetts General Hospital, Boston, Child Development Laboratory
Harvard University, Cambridge, Medical School
EDRS mf,hc
Paper Presented at the International Congress of Pediatrics (13th, Vienna, Austria, August 29-September 4, 1971).

Descriptors: exceptional child research; hyperactivity; minimally brain injured; drug therapy; medical treatment; medical research; behavior change; learning disabilities

The study compared the efficacy, side effects, and safety of magnesium pemoline (Cylert) and dextroamphetamine (Dexedrine) as compared with placebo. Subjects were 81 children, ages 6-12 years, who evidenced one or more signs of minimal brain dysfunction, and were referred with major complaints of hyperactivity, short attention span, distractibility, poor frustration tolerance, disruptive behavior, and academic problems. Subjects were randomly assigned to the three treatment conditions. During the 8 weeks, medical evaluation occurred four times, psychological testing twice, and parent and teacher ratings weekly. It was found that both drugs significantly reduced symptomatology over placebo controls. Dexedrine produced a more immediate and dramatic effect, with more patients being much improved. Cylert, however, did benefit a substantial number of patients, with fewer anorexic side effects. Neither drug produced hematologic, liver, kidney, or cardiovascular effects of consequence. (KW)

ABSTRACT 1652

EC 04 1652 ED 060 607
Publ. Date 72 20p.
Satterfield, James H. and Others
Physiological Studies of the Hyperkinetic Child.
Gateways Hospital, Los Angeles, California
National Institute of Mental Health (DHEW), Bethesda, Maryland
EDRS mf,hc

Descriptors: exceptional child research; hyperactivity; drug therapy; physiology; electroencephalography; emotionally disturbed; primary grades

Reported were results of the first year of a 3-year physiological study of the hyperkinetic child. The male subjects were 6 to 9 years of age, attending school, without sensory defects, 80 or above in Wechsler Intelligence Scale for Children Full Scale, off medication for 3 months prior to testing, and diagnosed as hyperactive. Electroencephalograph and evoked cortical measures were made for 31 hyperkinetic children and 21 normal controls in order to predict clinical response to stimulant medication. Experimental design included a structured interview, teacher and parent rating scales, medical evaluation, psychological testing, watching a video taped cartoon while taking cortical measures at beginning and end of 3-week period, and Ritalin and placebo treatments. Overall results indicated existence of a fundamental physiological difference between children responding well and poorly to stimulant medication. Low central nervous system arousal and good clinical response to stimulant treatment were found to characterize one group, while high central nervous system arousal and poor response to stimulant treatment were found to typify the other group. (CB)

ABSTRACT 1758

EC 04 1758 ED N.A.
Publ. Date May 72 7p.
Eisenberg, Leon
The Clinical Use of Stimulant Drugs in Children.
EDRS not available
Pediatrics; V49 N5 P709-15 May 1972

Descriptors: exceptional child education; minimally brain injured; hyperactivity; drug therapy

The general discussion of the clinical use of stimulant drugs in children often diagnosed as minimally brain injured considers a definition of hyperactivity, incidence of hyperactivity, nature and etiology of hyperactivity, pathophysiology of hyperactivity, use of the stimulant drugs dextroamphetamine and methylphenidate and their common side effects of insomnia and anorexia, efficacy of the drugs, and relationship of childhood use of stimulant drugs to potential adolescent drug abuse. (CB)

ABSTRACT 1882

EC 04 1882 ED N.A.
Publ. Date 72 6p.
Drug Therapy for Hyperactivity - Do the Benefits Outweigh the Hazards?
EDRS not available
Expectations; V1 N10 P1-6 Mar 1972

Descriptors: exceptional child education; learning disabilities; minimally brain injured; neurologically handicapped; hyperactivity; drug therapy

Briefly discussed in the bulletin are advantages and disadvantages of drug therapy for minimally brain injured or neurologically handicapped children who are hyperactive. It is noted that few controlled studies on the use of drugs to treat hyperactive children have been conducted and that a precise diagnosis of hyperactivity is difficult. Selected possible disadvantageous side-effects from use of drugs are said to be elevation of heart pressure, depressed appetite, nausea, insomina, and overdependence on drugs. Many parents are reported to resort to drug therapy when it seems to help solve the child's behavior problems; however, it is noted that part of the mental health industry is devoted to pushing amphetamines. Proper administration of the drugs is said to be the key to successful drug therapy, while use of successful alternative treatments may also be considered. (CB)

ABSTRACT 2055

EC 04 2055 ED N.A.
Publ. Date Jul 72 4p.
Freeman, Roger D.
The Drug Treatment of Learning Disorders: Continuing Confusion.
EDRS not available
Journal of Pediatrics; V81 N1 P112-5 Jul 1972

Descriptors: exceptional child education; learning disabilities; hyperactivity; drug therapy

Conclusions of a panel report by the Department of Health, Education, and Welfare are summarized, followed by brief criticism. The panel report concerned use of drug therapy in cases of hyperactivity. Selected results state that toxicity of stimulant drugs is not a major problem, that there is no significant established risk of later drug dependency, and that the school's role is to inform parents of the child's behavior, not to specifiy a method of medical management. Brief critique of the report notes that neither minimal brain dysfunction nor hyperkinetic disorder is a satisfactory diagnostic term, that the attribution of normal or superior intelligence level to hyperkinetic children makes no sense, that favorable response to drugs does not account for variables, and that the degree of drug therapy effectiveness is not really known. (CB)

ABSTRACT 2068

EC 04 2968 ED 066 853
Publ. Date Aug 72 25p.
Spring, Carl
Perceptual-Speed Deficit in Reading-Disability Children.
California University, Davis
National Center for Educational Research and Development (DHEW/OE), Washington, D. C.
EDRS mf,hc
OEC-9-71-0021 (057)

Descriptors: exceptional child research; reading difficulty; hyperactivity; percep-

tion; reading speed; learning disabilities; reactive behavior; behavior patterns; rating scales; perceptual motor coordination; drug therapy

In Study I, reading disability children were tested on perceptual encoding speed with a visual reaction-time task requiring same-different judgements. Performance of disabled children deteriorated as testing progressed, and recovered after a rest. In Study II, the poor readers of Study I were rated by their teachers on a 15-item inventory of abnormal motor behavior. Reaction time from initial trials of the test given in Study I was significantly correlated with the motor coordination factor on the inventory. In Study III, hyperactive boys taking methylphenidate medication and hyperactive boys whose medication was temporarily discontinued were tested. Reaction time on early trials was not significantly different for boys in the on-medication and off-medication groups. As testing progressed, reaction times of normal boys and boys taking medication remained fairly stable, while the performance of hyperactive boys not taking medication declined. (Author/CB)

ABSTRACT 744

EC 05 0744 ED N.A.
Publ. Date Jul-Sep 30p.
Campbell, Magda and Others
Lithium and Chlorpromazine: A Controlled Crossover Study of Hyperactive Severely Disturbed Young Children.
EDRS not available
Journal of Autism and Childhood Schizophrenia; V2 N3 P234-63 Jul-Sep 1972

Descriptors: exceptional child research; emotionally disturbed; hyperactivity; drug therapy; schizophrenia; childhood; comparative analysis

Reported was a controlled crossover study of the effects of lithium and chlorpromazine on 10 hyperactive, severely disturbed children (3 to 6 years of age) of whom six were schizophrenic and one autistic. Patients were matched for motor activity (hyper- and hypoactivity) and prognosis. More symptoms diminished on chlorpromazine than on lithium. However, improvements were only slight on both, except in one child whose autoaggressiveness and explosiveness practically ceased on lithium (nonblind evaluations). Blind ratings indicated no statistically significant difference between the two drugs as well as absence of statistically significant change from baseline to treatment with either. Lithium diminished the severity of individual symptoms (though not significantly) such as explosiveness, hyperactivity, agressiveness, and psychotic speech. Its effect in adult schizophrenia was compared to responses of schizophrenic children. Also discussed were the relationship of electroencephalograms to clinical improvement and toxicity, and effect of lithium on hyperactivity and aggressiveness. It was suggested that lithium may prove of some value in the treatment of severe psychiatric disorders in childhood involving aggressiveness, explosive affect and hyperactivity. (Author)

ABSTRACT 1725

EC 05 1725 ED N.A.
Publ. Date Apr 73 8p.
Safer, Daniel J.; Allen, Richard P.
Factors Influencing the Suppressant Effects of Two Stimulant Drugs on the Growth of Hyperactive Children.
Pediatrics; V51 N4 P660-7 Apr 73

Descriptors: exceptional child research; emotionally disturbed; elementary school students; hyperactivity; drug therapy; child development; growth patterns; physical development; body weight; body height

The effect of the regular intake of stimulant medication for 2 or more years on growth in weight and height was evaluated for 63 hyperactive elementary school children, 29 of whom received dextroamphetamine, 20 of whom received methylphenidate, and 14 of whom received no medication because of parental objection. Data indicated that the long-term use of dextroamphetamine in hyperactive children caused a highly significant suppression of growth in weight and height; that the long-term use of methylphenidate caused a less striking growth suppression only when daily doses over 20 milligrams were administered; that tolerance developed to the weight suppressant effects of dextroamphetamine, but not to its inhibition of height growth; and that increasing the total degree of stimulant drug use over time generally increased the degree of growth suppression. (Author)

ABSTRACT 2088

EC 05 2088 ED N.A.
Publ. Date Jun/Jul 73 4p.
Fowlie, Barbara
A Parent's Guide to Amphetamine Treatment of Hyperkinesis.
Journal of Learning Disabilities; V6 N6 P352-5 Jun/Jul 73

Descriptors: exceptional child education; learning disabilities; hyperactivity; drug therapy; parent role; observation

Suggested by a parent are ways that parents of a hyperactive child requiring treatment with stimulant drugs can observe their child for the most effective administration of medication. Stressed is the importance of frequent communication with the child's teacher and doctor to determine proper dosage levels. The improvement of self esteem and normal maturation are seen to lead to a gradual reduction in the need for medication. (DB)

ABSTRACT 2447

EC 05 2447 ED N.A.
Publ. Date Jan-Mar 13p.
Satterfield, James H. and Others
Response to Stimulant Drug Treatment in Hyperactive Children: Prediction from EEG and Neurological Findings.
Journal of Autism and Childhood Schizophrenia; V3 N1 P36-48 Jan-Mar 73

Descriptors: exceptional child research; emotionally disturbed; hyperactivity; early childhood; childhood; medical research; medical treatment; neurology; electroencephalography; drug therapy

A study of neurological examinations, electroencephalographic (EEG) findings, and behavioral responses to methylphenidate treatment in 57 hyperactive boys, 5 to 10 years of age, is reported and discussed. The results are said to have indicated that Ss with minor neurological abnormalities in four or more categories responded with significantly more improvement to methylphenidate treatment than Ss without abnormalities; Ss with abnormal EEGs had significantly more improvement than Ss with normal EEGs; and that a significant correlation was found between the degree of evidence of brain dysfunction (obtained from EEG and neurological examinations) and the probability of response to methylphenidate treatment. It is suggested that both the neurological and the EEG examinations play a significant role in the assessment of hyperactive children. (Author/MC)

ABSTRACT 241

EC 06 0241 ED N.A.
Publ. Date Oct 73 5p.
Murray, Joseph N.
Drugs to Control Classroom Behavior?
EDRS not available
Educational Leadership; V31 N1 P21-5 Oct 1973

Descriptors: exceptional child education; emotionally disturbed; hyperactivity; childhood; drug therapy; physicians; medical treatment

Focused upon in the article are issues related to drug therapy for modification of overactive behavior in children. The following questions of educators and professionals on use of medication are discussed: why are some young children medicated while others are not; who should receive medication; what are some possible causes of hyperkinesis; what drugs are used most frequently to control hyperkinesis; and what side effects are evident. Of findings reported from a study, some show that both parents and teachers reported from a study, some show that both parents and teachers expect medication to be a cureall for the child's overactivity and that the administration of a school affects the number of children medicated. Recommended is assessment of the child's behavior in every setting with subsequent review by the family physician before parents consent to medication; also suggested is implementation of alternatives to medication whenever possible. (MC)

ABSTRACT 928

EC 06 0928 ED N.A.
Publ. Date Nov 73 41p.
Grinspoon, Lester; Singer, Susan B.
Amphetamines in the Treatment of Hyperkinetic Children.
EDRS not available
Harvard Educational Review; V43 N4 P515-55 Nov 1973
Exceptional Child Research; Learning Disabilities; hRug Therapy; Research Reviews (Publications)

Reviewed is research on the effects of amphetamines on hyperactive children. It is suggested that amphetamines are prescribed more often than is necessary. Pointed out is the lack of understanding about the diagnosis and etiology of hyperactivity as well as the mechanism of amphetamine action in children. The observation that amphetamines have a paradoxical, calming effect on hyperactive children unlike the stimulating effect they exert on adults is said to fail to justify the assumption that amphetamines do not have the same potential for harm in children as in adults. It is concluded that the possible adverse effects of the drugs and the unknown long-term risks involved necessitate a reconsideration of the present policy of amphetamine administration in the schools. Suggested as an alternative to drug therapy is the use of behavior modification techniques. (DB)

ABSTRACT 1247

EC 06 1247 ED N.A.
Publ. Date Feb 74 6p.
Winsberg, Bertrand G. and Others
Dextroamphetamine and Methylphenidate in the Treatment of Hyperactive/Agressive Children.
Pediatrics; V53 N2 P236-41 Feb 1974

Descriptors: exceptional child research; behavior problems; agression; hyperactivity; drug therapy; emotionally disturbed

Studied was the comparative effectiveness of dextroamphetamine and methylphenidate for the treatment of severe behavior disorders among 18 children (from 5 to 10 1/2 years of age) hospitalized for neuropsychiatric conditions. Findings indicated that both drugs attenuate hyperactive and aggressive behaviors and that children who respond to one may be expected to respond to the other. Side effects were generally equally distributed between both medications and were of modest degree. One case each of methylphenidate-induced dyskinesia and of dextroamphetamine-induced toxic psychosis was found. (Author)

ABSTRACT 1546

EC 06 1546 ED N.A.
Publ. Date Mar 74 4p.
Ellis, M. J. and Others
Methylphenidate and the Activity of Hyperactives in the Informal Setting.
Child Development; V45 N1 P217-20 Mar 1974

Descriptors: exceptional child research; learning disabilities; hyperactivity; childhood; drug therapy

From a photographic record of nine hyperactive children, 8 to 10 years of age, playing in an informal setting, multiple measures related to activity and distractibility were derived and used to test (the same children) for the effects of 0.10, 0.30, and 1.00 mg/kg of methylphenidate relative to that of a placebo. The finding that of no discriminable effects of the medication on the children's behavior implied that methylphenidate's action does not influence energy expenditure patterns but that its mode of action involves attentional mechanisms, and that the drug seems to improve tractability and learning in situations involving clear-cut demands and high compliance, yet leaves informal behavior undisturbed. (Author/MC)

ABSTRACT 1596

EC 06 1596 ED N.A.
Publ. Date Sum 73 16p.
Wunderlich, Ray C.
Treatment of the Hyperactive Child.
Academic Therapy; V8 N4 P375-90 Sum 1973

Descriptors: exceptional child services; hyperactivity; medical treatment; allergy; etiology; learning disabilities; therapy; drug therapy; behavior change; nutrition

Described individually are the following forms of medical treatment for the hyperactive child: stimulants, tranquilizers, megavitamins, corticosteroids, antihistamines, anticonvulsants, food elimination, air filtration, allergic desensitization, perceptual motor training, and behavioral counseling. The author, a physician, believes that hyperactivity is often a a symptom of allergy and that megavitamin, antihistamine, corticosteroid, food elimination, air filtration, and desensitization are often effective because of their anti-allergy properties. Perceptual motor training is thought to help the child gain control of his own mind and body, while behavioral counseling can help the child's family cope with the child's behavior. Noted are problems in isolating causative factors and in arranging treatment steps to remedy the problem. (DB)

ABSTRACT 1889

EC 06 1889 ED N.A.
Publ. Date May 74 10p.
Glennon, Claire A.; Nason, Doris E.
Managing the Behavior of the Hyperkinetic Child: What Research Says.
Reading Teacher; V27 N8 P815-24 May 1974

Descriptors: exceptional child research; learning disabilities; hyperactivity; childhood; research reviews (publications); drug therapy; behavior change; medical treatment

Reviewed is research on the characteristics, educational management, and medical management of hyperkinesis in children. Noted are reactions against drug therapy reported in the popular media. Compared are various definitions of hyperactivity, its incidence, and possible causes. Ways of educational management are given to include reducing distraction and maintaining consistent discipline on the part of parents. Pointed out is the paradox that amphetamines (stimulants) have the effect of decreasing the hyperactivity of behaviorally disturbed children. Reviewed are studies which show improved academic performance and behavior when hyperactive children receive amphetamines. Concerns of the public such as whether drug therapy increases the possibility of drug dependency in later years are answered. (DB)

ABSTRACT 2101

EC 06 2101 ED N.A.
Publ. Date Jun 74 5p.
May, Deborah
Amphetamine Therapy with Hyperactive Children.
AVISO; P9-13 Jun 1974

Descriptors: exceptional child research; hyperactivity; drug therapy; literature reviews; research reviews (publications); behavior change; identification; research needs

Literature on amphetamine therapy with hyperactive children is reviewed. Amphetamines are explained to have a calming effect thought to be due to their effect in increasing the amount of norepinephrine liberated in the brain's reticular formation. Potential intervening variables which the author believes to have been neglected in research to date include parental attitudes, inconsistent administration of the drug, seasonal variations in behavior, and teacher, parent and therapist expectations. A literature review of 1100 drug studies is reported as identifying only 210 studies with adequate controls. The same review was found to show that while approximately half of the studies reviewed found significant behavioral effects of drugs on hyperactivity, only about one-third of all the studies measured behavior changes objectively; and that the preponderance of research indicating significant effects of drugs on hyperactivity was based on subjective evidence, while a majority of the studies finding no significance was based on objective criteria. Given the alleged increasing acceptance of amphetamine therapy, it was recommended that future research clarify methodological questions and provide objective data on drug effects. (GW)

ABSTRACT 2147

EC 06 2147 ED N.A.
Publ. Date 73 8p.
Lipman, Ronald S.
NIMH-PRB Support of Research in Minimal Brain Dysfunction and Other Disorders of Childhood.
Psychopharmacology Bulletin; P1-8 Special Issue 1973 DHEW Publication Number (HSM) 73-9002

Descriptors: exceptional children; emotionally disturbed; hyperactivity; learning disabilities; minimally brain injured; drug therapy; behavior change; financial support; grants; research needs; social problems; National Institute of Mental Health

The role of the National Institute of Mental Health (NIMH) and the Psychopharmacology Research Branch (PRB) in supporting stimulant drug treatment of hyperactive and minimally brain damaged children is summarized, current PRB research priorities are presented, and social and political issues raised by drug treatment are explored. Persons who received grants for pharmacotherapy from NIMH and PRB and their proposed research projects are listed. Current priorities are said to include concurrent design studies comparing the relative efficacy of different classes of

drugs for time periods longer than 8 weeks, dose-response studies, and anterospective studies of the natural history of minimal brain damage with and without pharmacologic intervention. Drug abuse and infringement on personal liberties are identified as issues of social concern in the field of behavior control via drug therapy. (GV)

ABSTRACT 231

EC 07 0231 ED N.A.
Publ. Date Oct 74 6p.
Page, John G. and Others
Pemoline (Cylert) in the Treatment of Childhood Hyperkinesis.
Journal of Learning Disabilities; V7 N8 P498-503 Oct 1974

Descriptors: hyperactivity; drug therapy; exceptional child research; learning disabilities; minimally brain injured; childhood; medical treatment; evaluation; Pemoline;

A controlled, double-blind study used the drug pemoline or a placebo in the management of hyperkinetic behavior with 413 children between 6 and 12 years of age diagnosed as having minimal brain dysfunction. Drug safety was evaluated with all Ss, while drug efficacy was evaluated with 238 Ss. Improvement in gross behavior as measured by parent, teacher and physician global evaluations, as well as improvement in cognitive and perceptual function as measured by psychological tests, is recorded for the pemoline group. Improvement was achieved with minimal side effects on a once-daily dosage regimen, indicating that pemoline is a highly useful clinical alternative to the amphetamines and methylphenidate as an adjunct in the management of hyperkinetic behavior. (Author/DB)

ABSTRACT 413

EC 07 0413 ED N.A.
Publ. Date 74 6p.
Huessey, H. R. and Others
8-10 Year Follow-Up of 84 Children Treated for Behavioral Disorder in Rural Vermont.

International Journal of Child Psychiatry; V40 N6 P230-5 74 (Acta Paedopsychiatrica)

Descriptors: exceptional child education; learning disabilities; emotionally disturbed; behavior problems; followup studies; hyperactivity; drug therapy; institutionalized (persons); dropouts;

Eighty-four rural Vermont children originally diagnosed as having hyperactive behavior disorders and placed on psychopharmacologic therapy were followed up 8-10 years later. Age of Ss at time of followup ranged from 9 to 24 years. The results indicated that the children diagnosed as hyperkinetic were seriously at risk for later academic, emotional, and social difficulties. Eighteen Ss were reported to have been institutionalized in either a mental hospital or a correctional facility; and Ss' school dropout rate (21%) was five times the usual Vermont school rate (4%). (Author/LH)

ABSTRACT 445

EC 07 0445 ED N.A.
Publ. Date 74 206p.
Gross, Mortimer D.; William, Wilson C.
Minimal Brain Dysfunction.
Brunner/Mazel, Inc., 64 University Place, New York, New York 10003 ($10.95).

Descriptors: exceptional child research; learning disabilities; minimally brain injured; early childhood; childhood; adolescents; medical evaluation; drug therapy; counseling; electroencephalography; incidence; therapy; evaluation; case studies; etiology; glossaries; questionnaires;

Reported is a study of 1056 children, 2 to 18 years old, of whom 77% were diagnosed as having (EEG) minimal brain dysfunction (MBD). It is explained that Ss were consecutive patients at a mental health center who were usually diagnosed as MBD if they demonstrated the classical MBD history (with traits such as hyperactivity), showed an abnormal EEG, had typical psychological test results, or showed abnormal neuropsychiatric findings. Statistical data are summarized including the high incidence (54%) of abnormal electroencephalograms (EEG). Also provided are a natural history of MBD, an outline of types of therapy used (such as pharmacotherapy and counseling). The efficacy of drug therapy is reported to have been demonstrated by study results. Eighteen typical case studies are summarized. Discussed are theoretical considerations of pathogenesis, etiology, and significance of the EEG. Among conclusions of the study given are typical MBD characteristics of restlessness, distractibility, and presence of an abnormal EEG. Current concepts of diagnosis and therapy are considered, including the contraindication of phenobarbitol, the frequent dramatic improvement caused by drugs such as methylphenidate, and the uselessness of psychotherapy with children under 12 years of age. A glossary of approximately 150 terms is provided. Appended are outlines of symptomatology and diagnostic evaluation, EEG data, findings when more than one sibling was examined, EEG data of monozygotic twins, a list of exercises to develop psychomotor skills, the questionnaire used to elicit MBD symptoms, and a chart illustrating types of EEG waves. (DB)

ABSTRACT 592

EC 07 0592 ED N.A.
Publ. Date Nov 74 6p.
Carpenter, Robert L.; Sells, Clifford J.
Measuring Effects of Psychoactive Medication in a Child with a Learning Disability.
Journal of Learning Disabilities; V7 N9 P545-50 Nov 1974

Descriptors: exceptional child research; learning disabilities; hyperactivity; early childhood; drug therapy; measurement techniques; behavior change; observation; testing; behavior rating scales;

Three types of behavioral measurement are described, along with the results of these techniques, as they were applied to a hyperactive 4 1/2-year-old girl placed on psychoactive medication. Results of the three techniques--direct measurement of behaviors, formal psychometric testing, and use of a rating scale--did not demonstrate any drug effects on the behaviors for which the medication was prescribed. (Author/DB)

ABSTRACT 902

EC 07 0902 ED N.A.
Publ. Date 72 5p.
Fox, Gertrude W.
Drug Therapy for Hyperkinetic Children: January 1969 through March 1972; Literature Search No. 72-6.
Literature Search Program, Reference Section, Reference Services Division, National Library of Medicine, 8600 Rockville Pike, Bethesda, Maryland 20014.

Descriptors: exceptional child research; exceptional child education; exceptional child services; hyperactivity; learning disabilities; behavior problems; drug therapy; medical treatment; affective behavior; psychotherapy; behavior change; bibliographies; research reviews (publications);

Presented in the bibliography are 64 citations on drug therapy for hyperkinetic children gathered from the January 1969 through March 1972 issues of Index Medicus. Citations are listed alphabetically by author and usually include title, pagination, date and descriptors assigned by the National Library of Medicine. (LH)

ABSTRACT 1174

EC 07 1174 ED 101 499
Publ. Date 74 166p.
Weiner, Ken, Ed.
Drugs and the Handicapped Child.
New York State Education Dept., Albany. Div. for Handicapped Children SN New York State Education Dept., Albany. Section for Emotionally Handicapped Children.
Rochester City School District, N. Y. Dept. of Special Education. New York State Education Dept., Albany. Bureau for Physically Handicapped Children.

Proceedings From Special Studies Institute, Rochester, New York
EDRS mf;hc

Descriptors: emotionally disturbed; drug education; legal responsibility; peer relationship; values; exceptional child education; learning disabilities; drug abuse; educational objectives; educational methods; affective behavior;

Reported are proceedings of a conference on drugs and the handicapped child. Provided is the transcript of discussions which centered on the use of legal (prescribed for medical and educational reasons) as well as illegal drugs. Considered are the following major topics: an overview of drug problems in the United States and of drug education in the Rochester (New York) schools; medical aspects and utilization of drugs for learning disabled and hyperactive children; a legal officer/counselor's view of drug uti-

lization and drug abuse; a human development approach to drug education; counseling services at a community center serving high school drug users; methods and materials used in Rochester (New York) drug education classes; instructional methods and resource materials for drug education; values clarification and drug use; educational techniques in drug abuse education; and the peer group approach to drug education. Given are recommendations for an effective drug education program which stressed a mental health approach, peer interaction, and examination of personal value systems. Also included are a basic bibliography of 18 books on affective education, composite results of pre- and post-tests by conference participants, and composite evaluation results indicating that most conference participants felt that proceedings were valuable. (LH)

ABSTRACT 1738

EC 07 1738 ED N. A.
Publ. Date Mar 75 4p.
Bosco, James
Behavior Modification Drugs and the Schools: The Case of Ritalin.
Phi Delta Kappan; V56 N7 P489-92 Mar 75

Descriptors: exceptional child education; learning disabilities; hyperactivity; drug therapy; medical treatment; administrative policy; teacher role; administrator role; educational philosophy; educational needs;

The use of Ritalin to modify the behavior of hyperactive children and the educational, social and ethical implications for school system policies and procedures are discussed. Stressed is the need for further research concerning the effects of Ritalin on scholastic variables under differing conditions and on social variables (such as administrator and teacher ratings and parental and peer attitudes). Considered are educational implication regarding the controversial nature of stimulant drug usage, the role of school personnel in screening and referring hyperkinetic children, teachers' legal and ethical responsibilities for children on a stimulant drug regime, and the investigation of teaching and curricular practices which may contribute to hyperactivity. Recommendations are offered for improving communication and coordination between school system and medical personnel and for evaluating educational programs for children with learning and behavior disorders. (LH)

ABSTRACT 1991

EC 07 1991 ED N. A.
Publ. Date Feb 75 8p.
Allen, Richard P. and Others
Effects of Psychostimulants on Aggression.
Journal of Nervous and Mental Disease; V160 N2 P138-45 Feb 75

Descriptors: exceptional child research; emotionally disturbed; childhood; adolescents; aggression; drug therapy; psychotherapy; stimuli; research reviews (publications); medical research;

A review of the literature on the relation between psychostimulant drugs and aggression leads to the following conclusions: that in laboratory animals, small and moderate acute doses of the major stimulants (as dextroamphetamine) generally either reduce or have no effect on aggression, whereas high doses and chronic moderate to high doses of these drugs increase aggression in most species; that in man, aggression is not produced by the major Federal Drug Administration licensed psychostimulants, except in doses which produce a paranoid psychosis; that children with hyperactivity and aggressive behavior usually respond to stimulant medication with reduced fighting, defiance, and impulsiveness, although the effect of the drug on aggression may be separate from its effect on hyperactivity; and that hyperactive, aggressive adolescents respond to stimulants with the same benefits as do hyperactive children. The available data on the human response to stimulants suggest a need to better evaluate low dose amphetamine effects on aggression in adolescents and adults. (Author)

ABSTRACT 2711

EC 07 2711 ED N. A.
Publ. Date Apr 75 8p.
Bower, K. Bruce; Mercer, Cecil D.
Hyperactivity: Etiology and Intervention Techniques.
Journal of School Health; V45 N4 P195-202 Apr 75

Descriptors: exceptional child education; learning disabilities; hyperactivity; etiology; intervention; theories; drug therapy; attention span; motivation; reinforcement; behavior change; operant conditioning; verbal learning; environmental influences;

Discussed are various theories on the etiology of hyperactivity in children, and described are medical and nonmedical intervention strategies. Briefly reviewed is the historical identification of the hyperactive condition. Considered are etiological theories including pathophysiological theories, attention and motivation theories, and reinforcement theory. The following intervention strategies are examined: reduction of environmental distractions, verbal mediation, administration of stimulants or tranquilizers, behavior modification, and observational learning. It is concluded that hyperactivity is not one but a complex of symptoms, that administration of stimulants may be indicated though tranquilizers are not, and that drug intervention should be considered only when other interventions such as contingency plans, modeling, and verbal mediation have failed. (DB)

ABSTRACT 2394

EC 07 2394 ED N. A.
Publ. Date Apr 75 3p.
Medication for Hyperkinetic Children.
Pediatrics; V55 N4 P560-2 Apr 1975

Descriptors: hyperactivity; drug therapy; physicians; exceptional child services; learning disabilities; medical evaluation;

Discussed is the need for the physician's careful management of control medication for hyperkinetic children. Proper dosage, adequate trial periods, and appropriate selection of patients are among the factors considered essential in successful drug therapy. (CL)

ABSTRACT 2723

EC 07 2723 ED N. A.
Publ. Date Apr 75 4p.
Barker, Philip
Haloperidol. (Annotation)
Journal of Child Psychology and Psychiatry; V16 N2 P169-72 Apr 75

Descriptors: exceptional child services; exceptional child research; emotionally disturbed; hyperactivity; behavior problems; childhood; medical treatment; drug therapy; Haloperidol;

The use of the drug haloperidol to treat childhood hyperactivity, tics, and stuttering is evaluated; and dosage, side effects and toxic effects are described. It is concluded that haloperidol appears useful in treating behavior disorders, is safe when properly used, and should seldom be the only treatment given. (LH)

ABSTRACT 2748

EC 07 2748 ED N. A.
Publ. Date May 75 8p.
Schain, Richard J.; Reynard, Carol L.
Observations on Effects of a Central Stimulant Drug (Methylphenidate) in Children with Hyperactive Behavior.
Pediatrics; V55 N5 P709-16 May 1975

Descriptors: exceptional child research; learning disabilities; hyperactivity; medical treatment; drug therapy;

Ninety-eight hyperactive children (6-to-12-years- old), were treated with methylphenidate or placebo for 4 months under double-blind conditions. Results indicated that only one of the 48 children receiving placebo was judged to be a drug success, that 74 Ss receiving methylphenidate were judged to be drug successes, that a wide range of dosage was required for optimum drug effects, that drug failures were due either to withdrawn, apathetic behavior or lack of evidence of drug effectiveness, that overweight children did not respond well to medication, that the most dramatic successes were seen in children characterized as exhibiting hyperactivity in the absence of other evidence of neurological or emotional disturbances. (Author/LH)

ABSTRACT 2916

EC 07 2916 ED N. A.
Publ. Date May 75 4p.
Weber, Bruce A.; Sulzbacher, Stephen I.
Use of CNS Stimulant Medication in Averaged Electroencephalic Audiometry with Children with MBD.
Journal of Learning Disabilities ; V8 N5 P300-3

Descriptors: minimally brain injured; auditory tests; drug therapy; exceptional child research; learning disabilities; hyperactivity; childhood;

Averaged electroencephalic audiometry (AEA) was conducted to evaluate the

hearing of 12 children (mean age 8 years 6 months) diagnosed as having minimal brain dysfunction (MBD). Each child was tested on three separate days to permit a double blind evaluation of responsiveness to no drug, placebo, and central nervous system stimulant drug conditions. In addition, 9 of the 12 children were tested a fourth time to permit an examination of the two dosage levels. Lower thresholds were recorded when the subjects were tested on medication. The finding suggested that AEA with MBD children can be enhanced by taking advantage of the medication prescribed to counteract hyperactivity. It was also observed that the AEA performance of children on whom medication had a favorable behavioral effect was different from that of poor drug responders, even in the no medication conditions. (Author)

ABSTRACT 3178

EC 07 3178 ED N. A.
Publ. Date J/Jul75 5p.
Walker, Sydney
Drugging the American Child: We're Too Cavalier About Hyperactivity.
Journal of Learning Disabilities ; V8 N6 P354-358

Descriptors: hyperactivity; etiology; biological influences; medical treatment; drug therapy; exceptional child services;

Physicians have been treating hyperactivity in children with drugs as if it were a disease instead of a collection of symptoms which require exhaustive diagnostic tests to determine the underlying problem. Physiological causes of hyperactivity include poor oxygenation due to a heart problem, low blood sugar, malnutrition, lead poisoning, glandular problems, brain damage due to cyanosis at birth, mixed dominance, mild seizures, food additives, tight underwear, or sleeplessness. Ritalin, the most commonly prescribed medication for hyperactivity, appears to have side effects such as the suppression of growth. (DB)

ABSTRACT 3504

EC 07 3504 ED N. A.
Publ. Date Sep 75 7p.
Porges, Stephen W.; And Others
The Influences of Methylphenidate on Heart Rate and Behavioral Measures of Attention in Hyperactive Children.
Child Development; V46 N3 P727-733

Descriptors: exceptional child research; hyperactivity; childhood; drug therapy; attention span; physiology; reactive behavior; Methylphenidate;

A study of 16 hyperactive children (6.5-12 years) was conducted to assess attentional deficits and response to methylphenidate, a stimulant drug. During trials with a race track apparatus, Ss were monitored under placebo and methylphenidate conditions for components (heart rate and reaction-time performance) associated with attention. Attentional deficits shown by long response latencies were reflected in heart rate responses theoretically incompatible with sustained attention. Ss exhibiting the greatest attentional deficit displayed the most favorable response to methylphenidate in both reaction-time performance and heart rate measures. (Author/SB)

ABSTRACT 3702

EC 07 3702 ED N. A.
Publ. Date Jan 75 10p.
Cole, Sherwood O.
Hyperkinetic Children: The Use of Stimulant Drugs Evaluated.
American Journal of Orthopsychiatry; V45 N1 P28-37

Descriptors: hyperactivity; behavior patterns; drug therapy; neurology; medical evaluation; exceptional child education; childhood; early childhood; literature reviews;

Presented is a paper on hyperkinetic children which reviews behavioral characteristics and the use and effect of stimulant drugs in treatment. It is reported that hyperkinesis is mainly a problem of young children since all but the most severe cases seem to outgrow the behavior in adolescence. Although evidence is seen to support the normalizing effects of stimulant drugs, it is explained that too little attention has been paid to potential side effects. It is concluded that there is a need for a broader program of clinical evaluation which assesses drug effects not only on behavior, but on appetite, the cardiovascular system, as well as the sociological impact. (Author/SB)

ABSTRACT 3703

EC 07 3703 ED N. A.
Publ. Date Jan 75 13p.
Schleifer, Michael; And Others
Hyperactivity in Preschoolers and the Effect of Methylphenidate.
American Journal of Orthopsychiatry; V45 N1 P38-50

Descriptors: hyperactivity; preschool education; drug therapy; behavior patterns; cognitive processes; exceptional child research; family problems; psychomotor skills; aggression; Ritalin;

Twenty-eight hyperactive preschoolers were observed and tested to determine behavioral and cognitive patterns and to examine the effect of methylphenidate (Ritalin) treatment. Data were obtained from nursery school observations, psychological tests, and psychiatric interviews with mothers. Among results were that Ss were more aggressive than controls, that Ss did not differ significantly from controls in motor impulsivity, and that there were no significant differences in family pathology between true (extremely hyperactive) and situational (not pathologically active in nursery school) hyperactives. In addition, 26 of the Ss were observed for 3 weeks, rated on the Hyperactivity Rating Scale, and given individual psychological tests under two conditions (Ritalin and placebo). Ritalin was found to reduce hyperactivity at home, but it did not improve nursery behavior or psychological functioning. Evidence indicated that preschool hyperactivity varies in its manifestations and pervasiveness from one situation to another; and that unwanted side effects make Ritalin less useful for preschoolers than for older hyperactive children. (Author/SB)

ABSTRACT 3717

EC 07 3717 ED N. A.
Publ. Date Jul 75 9p.
Loney, Jan; Ordona, Truce T.
Using Cerebral Stimulants to Treat Minimal Brain Dysfunction.
American Journal of Orthopsychiatry; V45 N4 P564-572

Descriptors: hyperactivity; minimally brain injured; childhood; drug therapy; research reviews (publications); exceptional child research; medical case histories; physicians; behavior change; medical evaluation;

Considered are questions raised during a study of the medical records of 135 minimally-brain-dysfunctioned boys (6 - 12 years old) treated for hyperactivity with cerebral stimulants. The questions discussed (with sample findings in parentheses) include: Do physician factors contribute to child diagnosis, treatment choice, and clinical improvement? (During initial treatment period, the child's diagnosis and form of treatment but not his outcome were significantly influenced by the senior supervising physician); What is improvement? (There was almost no stated consideration of possible environmental or developmental factors in behavior change); What kind of side effects occur and how frequent are they? (The side effects of Ritalin were reported to be minimal and to dissipate of their own accord); When should cerebral stimulants be used? (Answers to this question ranged from 'with all children suspected of minimal brain dysfunction, on a trial basis' to 'with none of these children, except possibly as a last resort'). (Author/SB)

ABSTRACT 3818

EC 07 3818 ED 112593
Publ. Date Aug 72 170p.
Weeks, David C.; And Others
A Study of Public Communication Critical to Child Health Care.
George Washington University, Washington, D. C. Dept. of Medical and Public Affairs.
Office of Child Development (DHEW), Washington, D. C.
EDRS mf;hc

Descriptors: hyperactivity; surveys; information dissemination; drug therapy; attitudes; exceptional child education; childhood; Freedman Report;

A two-phase survey was conducted to examine the impact of the 'Report on the Conference on the Use of Stimulant Drugs in the Treatment of Behaviorally Disturbed Young School Children' (Freedman report) upon its intended audience. Questionnaires were mailed to professionals (in medicine, psychiatry, and education), public managers (for education and public health) and both randomly selected and concerned laymen (those who had requested information on hyperkinesis); the 1673 returned questionnaires were evaluated for awareness

of drug treatment and attitudes toward its use, dissemination, and effect of the Freedman report, and sources of information about hyperkinesis. Among the results were that most respondents were aware of drug treatment, that the Freedman report was best known among professionals in medicine and least known among laymen, and that the principal source of information on child hyperkinesis was professional literature. Recommended were the development of a dissemination base and publication of future communications with design and appearance consistent with audience preference. Included are figures (such as a graph on the search for index medicus for journal articles, and attachments including literature on hyperkinesis.) (For the text of the Freedman report, see EC 03 2612.) (SB)

ABSTRACT 3891

EC 07 3891 ED N. A.
Publ. Date S/Fal75 8p.
Ellis, Teresa; Justen, Joseph E.
Drug Therapy for the Hyperkinetic Child: Some Commonly Asked Questions and Answers.
Special Children; V2 N1 P5-11 23 Sum/Fall 75

Descriptors: exceptional child education; learning disabilities; hyperactivity; drug therapy;

Responses to common questions concerning drug therapy for the hyperkinetic child are given. Topics addressed include most frequently prescribed drugs, possible side effects, and length of treatment. (CL)

ABSTRACT 2357

EC 06 2357 ED N.A.
Publ. Date 74 77p.
Von Hilsheimer, George
Allergy, Toxins, and the Learning Disabled Child.
Academic Therapy Publications, 1539 Fourth Street, San Rafael, California 94901 ($3.50).

Descriptors: exceptional child education; learning disabilities; emotionally disturbed; behavior problems; biochemistry; metabolism; etiology; allergy; nutrition; screening tests; physical characteristics; Green Valley School

The relation of metabolic efficiency and systemic disease to learning disabilities, behavior disorders, and emotional disturbances are examined on the basis of the author's experience in his Florida school. Conditions thought to be related to allergies and toxins include hyperactivity; unusual fat metabolism; hypothyroidism; insufficient absorption of vitamins; high values of lead, toxic metals and chemicals; and inability to process gluten, corn, food dyes and flavorings. Methods of screening children for allergies are described including food diaries, rotary diets, fasting, drop tests and skin tests. Treatment regimens described involve improving absorption; prescribing lactobacillus acidophilus milk, yogurt or tablets; reducing stress; and hypodesensitization. Listed are minor physical anomalies found in learning disabled, brain damaged, and emotionally disturbed children, although no cluster of anomalies is associated with any disorder. Also included is a photographic essay of several children discussed in the book. (GW)

ABSTRACT 2724

EC 06 2724 ED N.A.
Publ. Date 73 170p.
Wunderlich, Ray C.
Allergy, Brains, and Children Coping. Allergy and Child Behavior: The Neuro-Allergic Syndrome.
Johnny Reads, Inc., Box 12834, St. Petersburg, Florida 33733 ($7.00).

Descriptors: exceptional child services; special health problems; allergy; learning disabilities; neurologically handicapped; emotionally disturbed; medical case histories; adjustment (to environment); behavior problems; medical treatment; drug therapy; Neuro-Allergic Syndrome

Two factors occurring prominently in children who have trouble coping with their environment--allergy and neurological dysfunction--are discussed as they interfere with a child's life. The Neuro-Allergic Syndrome or coexistence of brain dysfunction and allergy is described so parents, teachers, and physicians can understand the biological basis of behaviors, such as hyperactivity, aggression, irritability, destructiveness, and inability to learn. A number of case studies of the use of corticosteroids to treat Neuro-Allergic Syndrome are reviewed. Additional case studies illustrate the use of other treatment techniques for problems associated with Neuro-Allergic Syndrome. These other treatment techniques include such methods as allergy vaccines, elimination diets, and vitamin and mineral treatment. (MYS)

ABSTRACT 2572

EC 07 2572 ED N. A.
Publ. Date Fal 74 6p.
Hawley, Clyde; Buckley, Robert
Food Dyes and Hyperkinetic Children.
Academic Therapy; V10 N1 P27-32 Fal 1974

Descriptors: hyperactivity; nutrition; allergy; medical evaluation; medical treatment; exceptional child services; learning disabilities; physicians; Feingold (BF); Salicylate Free Diet;

Described are medical procedures for testing hyperkinetic children for food allergies and reactions to products containing coal tar dye additives. It is recommended that patients demonstrating sensitivity to food additives be placed on a salicylate- free diet; and a list provided by B. Feingold, M. D. is given of foods, beverages, and drugs to be avoided. (LH)

ABSTRACT 2875

EC 07 2875 ED N. A.
Publ. Date May 75 7p.
Feingold, Ben F.
Hyperkinesis and Learning Disabilities Linked to Artificial Food Flavors and Colors.

EDRS mf;hc
American Journal of Nursing ; V75 N5 P797-803 May 75

Descriptors: exceptional child research; learning disabilities; hyperactivity; etiology; medical treatment; nutrition; nursing; Food Additives;

Discussed is the background of the author's research linking hyperkinesis and learning disabilities (H-LD) to artificial food flavors and colors. The incidence of hyperkinesis is seen to have increased in recent years and this is attributed to increased consumption of foods containing synthetic flavors and colors. Reactions to additives are given to include behavioral disturbances characteristic of hyperkinesis. It is reported that five separate dietary programs conducted with 194 hyperkinetic children showed that approximately 50% of the children responded to the strict elimination of food additives from the diet with the younger children responding more rapidly and completely. Possible pharmacological causes for the observed effects are noted. Relationships to other sensitivities such as aspirin and foods containing salicylates are considered. It is recommended that a symbol on food packages indicate the complete absence of artificial colors and flavors. Tables provide additional information on characteristics of H-LD-children, organic and symptomatic terminology applied to H-LD children, chemicals used in food processing, adverse reactions attributed to synthetic flavors and colors, and numbers of children responding to diets eliminating synthetic colors, flavors, and natural salicylates in the five studies. An insert focuses on the role of the nurse practitioner in supervising a child on the recommended diet. (DB)

ABSTRACT 3049

EC 07 3049 ED N. A.
Publ. Date Jul 75 2p.
Moyer, K. E.
The Physiology of Violence: Allergy and Aggression.
Psychology Today ; V9 N2 P77-79 Jul 75

Descriptors: exceptional child research; special health problems; allergy; aggression; behavior patterns; hyperactivity; neurology; physiology; affective behavior; etiology;

Food allergies in some children cause aggressive, hyperactive behavior; and research into such allergy-induced violence could lead to understanding and control of the brain's neural networks in relation to aggression. Studies show that allergic children may display disoriented, aggressive behavior after eating an offending food; and this behavior disappears when the allergen is removed. Two objectives for further study of allergy-caused violence are to recognize and treat the symptoms of those who become irritable after eating certain foods, and to further understanding of the physiological bases of aggressive behavior. Although there is much evidence that the brain contains inborn neural networks that become active in the presence of certain stimuli, further research is needed to determine whether allergies produce localized brain swelling which results in aggressive behavior. (SB)

ABSTRACT 3479

EC 07 3479 ED N. A.
Publ. Date Jan 75 4p.
Smith, Nila Banton
Child Nutrition in a Changing World.
Childhood Education; V51 N3 P142-145

Descriptors: exceptional child education; handicapped children; nutrition; physical development; learning; academic achievement; performance factors;

Reviewed is research relating nutrition to learning and school achievement in young children whose hyperactivity was treated by diet, and emphasized is the need for adequate nutrition instruction for children from all social and economic classes. (CL)

ABSTRACT 3899

EC 07 3899 ED N. A.
Publ. Date Nov 75 9p.
Raman, S. Pattabi
Role of Nutrition in the Actualization of the Potentialities of the Child. An Anisa Perspective.
Young Children; V31 N1 P24-32 Nov 75

Descriptors: exceptional child education; emotionally disturbed; hyperactivity; nutrition; intervention; child development; health; learning difficulties; biological influences; psychological characteristics; mothers; Anisa Theory;

The role of nutrition in child development is discussed in terms of early intervention programs and the Anisa theory of development, nutrition's effect on achieveing learning competence, the relationship between nutrition and emotional disturbances, and key points of intervention. It is noted that the Anisa theory recognizes two categories of developmental potentialities: biological (in which nutrition is the key factor to actualization) and psychological (in which learning is the fundamental factor). Evidence is seen to indicate that undernutrition interferes with central nervous system development and has effects which include loss of learning time. A significant number of severe learning impairments associated with hyperkinesis are reported to have been traced to nutritional imbalances and metabolic dysfunction amenable to diet therapy. It is suggested that intervention programs insure sound nutritional, psychological, and emotional states of the mother at least a year prior to conception and during the pre- and postnatal growth of the child. (SB)

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